PHOTORELEASEFORM

LastName:	FirstName:		MI:	
Address:		City:	State:	Zip:
HomePhone:	<u>'</u>	TitleofProgram:	,	
Iherebygive and grant to the City of Alvin, amunicipal corporation, its successors and assigns, the right to use, withor without comparight, myname and all pictures, photographs, reproductions, transparencies, motion pictures and recordings, both video and sound, taken of or made by myselformy family that said company has produced or had produced for it with full freedom to retouch said pictures, photographs, reproductions, transparencies, motion pictures and/or edit statements as may be necessary in its judgment for proper presentation and to use or cause to be used all such pictures and recordings, both video and sound, for all pur poses for an unlimited period of time in all media throughout the world.				
The under signed does hereby release the City of Alvin, its successors and assigns from any and all claims for damage of libel, slander, invasion of the right of privacy or any other on the use of said material.				
No promises have been made to me to secure my signature to this release other than the considerationnamedabove.				
Ihereby warrant that I'm full age and have every right to contract myown name and/or that of mym-inorchild in the above regard.				
SignatureofParticipant	Date			
ParentalGuardian(ifminor)		Date		